Date:

United States District Court for the District of Puerto Rico Plaintiff(s) v. Civil Action No. Defendant(s) SUMMONS IN A CIVIL ACTION To: (Defendant's name and address) A lawsuit has been filed against you. Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — or 90 days in a Social Security Action — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court. FRANCES RIOS DE MORAN, ESQ. CLERK OF COURT

Signature of Clerk or Deputy Clerk

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Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

| | This summons for (nam | e of individual and title, if any) | | | |
|---------|--|---|------------------------|-------------|--|
| was re | ceived by me on (date) | | | | |
| | ☐ I personally served | I personally served the summons on the individual at (place) | | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons at the individual's residence or usual place of abode with (name) | | | | |
| | , a person of suitable age and discretion who resides there, | | | | |
| | on (date), and mailed a copy to the individual's last known address; or | | | | |
| | ☐ I served the summo | , who is | | | |
| | designated by law to a | wed the summons on (name of individual) , who is ed by law to accept service of process on behalf of (name of organization) | | | |
| | | | on (date) | ; or | |
| | ☐ I returned the sum | ; or | | | |
| | Other (specify): | | | | |
| | | | | | |
| | My fees are \$ | for travel and \$ | for services, for a | total of \$ | |
| | I declare under penalty of perjury that this information is true. | | | | |
| | | | | | |
| Date: | | | | | |
| | | | Server's signati | ıre | |
| | | | Printed name and title | | |
| | | | | | |
| | | | Server's addre | ss | |
| Additio | onal information regarding | ng attempted service, etc: | | | |
| | | | | | |